

To: Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852

From: @dreamgbutterfly botanicals

Re: Docket No. FDA-2019-N-0767 for "International Drug Scheduling; Convention on Psychotropic Substances; Single Convention on Narcotic Drugs; World Health Organization; Scheduling Recommendations; Dronabinol (*delta-9* tetrahydrocannabinol) and its Stereoisomers; Cannabis, Cannabis Resin, Extracts and Tinctures; Cannabidiol Preparations; and Pharmaceutical Preparations of Cannabis."

Date: September 30, 2019

I support the rescheduling and declassification of cannabis based interventions and adult use. It's a good time to pay attention to the laws that need clarification in this process so we aren't being duplicative or unintentionally create a vacuum which can happen with conflicting or non-harmonious regulations, laws and understanding of the laws.

I also think it's a good idea to have research laws that protect patients and the public while they are being revamped. The burden of having cannabis scheduled as illicit has caused irreparable harm to individuals and families. The status of cannabis to this date and its misclassification has unduly burdened police and corrections institutions while simultaneously eroding evidence based science and trust in public safety and health.

I have included a number of public comment submissions for your review in addition to what I have identified most recently.

Hemp Crop Insurance Coverage Available for 2020 https://t.co/vyPbxcJU10

Passed the House - H.R.1595 - SAFE Banking Act of 2019 https://t.co/l01NIH0nfa



I'd also get ready to do drug replacement detoxification research with our new state level cannabis regulations and get the private sector and the tribal health organizations on board because people are going to detox and the DEA laid out the plan.

DEA Proposes to Reduce the Amount of Five Opioids Manufactured in 2020, Marijuana Quota for Research Increases by Almost a Third https://t.co/dyRL1KLH4M

Use of a Synthetic Cannabinoid in a Correctional Population for Posttraumatic Stress Disorder–Related Insomnia and Nightmares, Chronic Pain, Harm Reduction, and Other Indications https://t.co/2pXlvRVvYL

Reorganization of the Office of New Drugs with Corresponding Changes to the Office of Translational Sciences and the Office of Pharmaceutical Quality https://t.co/6m2NKvDflW Vetting Peer Reviewers at NIH's Center for Scientific Review: Strengths and Limitations https://t.co/7p80tqdQYk

Nationwide Genetic Testing Fraud: Media Materials | Office of Inspector General | U.S. Department of Health and Human Services https://oig.hhs.gov/newsroom/media-materials-09-27-2019#.xy5-N3fDTdQ.twitter

NIH Has Made Strides in Reviewing Financial Conflicts of Interest in Extramural Research, But Could Do More Report (OEI-03-19-00150) 09-25-2019 https://oig.hhs.gov/oei/reports/oei-03-19-00150.asp#.XY5-dYLtTK8.twitter

The National Institutes of Health Has Limited Policies, Procedures, and Controls in Place for Helping To Ensure That Institutions Report All Sources of Research Support, Financial Interests, and Affiliations Audit (A-03-19-03003) 09-25-

2019 https://oig.hhs.gov/oas/reports/region3/31903003.asp#.XY5 CkB-WhU.twitter

I have been really pleasantly surprised with cannabis based medicine so far except for the inconsistencies in law and challenge as a patient to obtain it. To date the reduction of polypharmacy has been a major attraction for patients. These barriers for patients need to be addressed but I believe we are moving forward and encourage the continued effort to identify safer drug profiles that can better address pain needs of patients while increase safety and health for the community at large while providing a better understanding of science, medicine, health and drug regulation in an inclusive, measured and achievable manner.